

No 7000000049

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

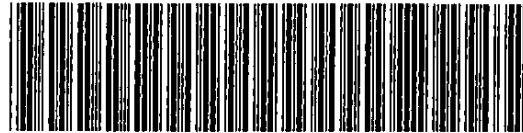
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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1-3-07  
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## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Princenia A. Hicks Homemaker & Companion Service Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Princenia A. Hicks  
Name (Printed or typed)

543 East 55th St.  
Address

Jacksonville Fl. 32208  
City, State & Zip

904 536-4107  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Princenia A. Hicks Homemaker & Companion Service Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

543 East 55th St.  
Jacksonville FL 32208

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Princenia A. Hicks Homemaker & Companion Service Inc., providing companionship, and or sitting, private sitting 24 hours 7 days, assisting in homemaker and errands for the elderly, handicapped, and convalescent, to promote independent living.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

All directors will be appointed by owner

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Princenia A. Hicks (owner)  
543 East 55th St.  
Jacksonville FL 32208

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Princenia A. Hicks  
543 East 55th St.  
Jacksonville FL 32208

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Princenia A. Hicks  
543 East 55th St.  
Jacksonville FL 32208

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Princenia A. Hicks  
Signature/Registered Agent

Jan. 01, 2007  
Date

Princenia A. Hicks  
Signature/Incorporator

Jan. 01, 2007  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA